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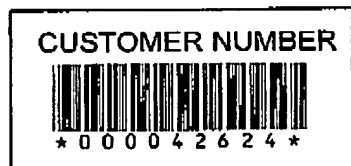
In re Patent Application of:	Attorney Docket No.: 2599-0002
BEHN, Kristofor et al.	Group Art Unit: 3677
Application. S.N.: 10/812,400	Confirmation No.: 1752
Filed: March 30, 2004	Examiner: SANDY, Robert J.
Title: MULTI-DEVICE TETHER	Date: September 13, 2005

Name of paper(s) being transmitted: Response; Response Transmittal Cover Sheet

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Name:	C. Allen	Signature:	<i>C. Allen</i>	Date:	September 13, 2005
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Davidson Berquist Jackson &amp; Gowdey LLP

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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In re Patent Application of:

Atty. Docket No.: 2549-0002.

BEHN, Kristofor et al.

Confirmation No.: 1752

Appln. No.: 10/812,400

Group Art Unit: 3677

Filed: March 30, 2004

Examiner: SANDY, Robert J.

Title: **MULTI-DEVICE TETHER**

Date: September 13, 2005

SEP 13 2005

REPLY/AMENDMENT/LETTER  
TRANSMITTAL COVER SHEETHon. Commissioner of Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

This is a reply/amendment/letter in the above-identified application and includes the attachments hereto. The signature below is treated as the signature to the attachments in the absence of a signature thereto.

## FEE REQUIREMENTS

	<i>Claims remaining after amendment</i>		<i>Highest number previously Paid For</i>		<i>Present Extra</i>	<i>Rate: Large/Small Entry</i>	
1. <i>Total</i>	15	minus	20	*	= 0	X \$50 / \$ 25 =	\$0
* If this number is less than 20, enter "20"							
2. <i>Independent Claims</i>	3	minus	3	**	= 0	X \$200 / \$100 =	\$0
** If this number is less than 3, enter "3"							
3. If amendment enters multiple dependent claim(s) into this application for first time (leave this line <u>blank</u> if this is an <u>reissue</u> application)						\$360 / \$180 =	\$0
4. Original due date: September 15, 2005							
					Check time period and enter appropriate fee		
5. Petition is hereby made to extend the <u>original</u> due date to cover the date this response is filed for which the requisite fee is:					<input type="checkbox"/> 1 month <input type="checkbox"/> 2 months. <input type="checkbox"/> 3 months <input type="checkbox"/> 4 months <input type="checkbox"/> 5 months.	\$120 / \$60 \$450 / \$225 \$1010 / \$510 \$1590 / \$795 \$2160 / \$1080	\$0
6. <input type="checkbox"/> Attached is a Petition/Fee under Rule No.						\$	\$0
7. Other Fee for							\$0
8. Total Fee Enclosed:							\$0

*This is a 2 page form,  
continued on next page...*

*In re Patent Application of:*

TRANSMITTAL COVER SHEET, PAGE 2

BEHN, Kristofor et al.

Appln. No.: 10/812,400

Confirmation Number: 1752

9. ☐ Please charge the total fee on line 8 above to our deposit account below under the stated order number.

Our Deposit Account No.: 501860

Our Order No. (Client-Matter No.): 2599-0002

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Respectfully submitted,

By:

for Peter W. Gowdey

Registration No.: 25,872

Reg. No. 37497

Davidson Berquist Jackson &amp; Gowdey LLP

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re PATENT Application of:

BEHN, Kristofor et al.

Appl. S.N.: 10/812,400

Filing Date: March 30, 2004

Title: **MULTI-DEVICE TETHER**

Confirmation No.: 1752

Attorney Docket: 2599-0002

Group Art Unit: 3677

Examiner: SANDY, Robert J.

Date: September 13, 2005

## AMENDMENT

Hon. Commissioner of Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated June 15, 2005, please amend the application  
as follows:

Amendments to the claims begin on page 2.

Remarks begin on page 6.